### ANNUAL RATES OF EMPLOYEE SEPARATION FROM SERVICE BEFORE ELIGIBILITY TO SERVICE RETIREMENT

Female Employees

Non-Management

Service in years t	15	Rates of for empl			ng year service a			
		20	20			1	10	
0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	.208 .148 .116 .079 .071 .066 .062 .057 .053 .049 .044 .040 .035 .029 .026 .022 .020 .018 .017 .016 .015 .015 .015 .015	.194 .139 .107 .081 .071 .064 .057 .050 .046 .042 .039 .035 .031 .027 .026 .024 .021 .020 .018 .018 .018 .018 .015 .015 .015 .015 .015	.164 .115 .087 .072 .058 .048 .044 .037 .030 .026 .026 .026 .026 .022 .020 .020 .02	.136 .094 .067 .056 .045 .037 .029 .023 .023 .022 .022 .022 .022 .022 .022	.113 .075 .051 .040 .033 .029 .026 .024 .022 .022 .021 .021 .021 .021 .021 .020 .020	.096 .063 .039 .034 .031 .029 .027 .025 .024 .023 .023 .023 .023 .023 .021 .021 .020	.087 .057 .032 .035 .030 .029 .028 .028 .028 .028 .028 .028	.088 .061 .034 .032 .032 .031 .031 .033 .035 .041 .046 .055

Note: Based on separations for all causes.



TABLE 3

BELL ATLANTIC CORPORATION

ANNUAL RATES OF RETIREMENT ON DISABILITY PENSION

#### Non-Management

Age x	Rates of deretirement du age x + .5	ring year of to x + 1.5	Age x	Rates of diretirement duage x + .5	ring year of to x + 1.5
	Male	Female		Male	Female
29	.0003	.0011	47	.0017	.0052
30	.0003	.0011	48	.0022	.00 <u>.5</u> 7
31	.0003	.0012	49	.0027	.0062
. 32	.0003	.0012	50	.0032	.00 <del>5</del> 8
33	.0003	.0013	51	.0038	.0075
34	.0003	.0014	52	.0043	.0080
35	.0003	.0014	53	.0051	.0086
36	.0003	.0015	54	.0064	.0092
37	.0003	.0015	55	.0087	.0098
38	.0003	.0017	56	.0112	.0102
39	.0004	.0021	57	.0139	.0110
40	.0005	.0024	58	.0171	.0117
41	.0007	.0027	59	.0202	.0125
42	.0007	.0032	60	.0233	.0137
43	.0008	.0035	61	.0262	.0150
44	.0009	.0039	62	.0308	.0167
45	.0011	.0043	63	.0356	.0188
46	.0013	.0048	64	.0411	.0217
					<u> </u>



TABLE 4

#### ANNUAL RATES OF RETIREMENT ON SERVICE

#### Male Employees

Non-Management

Service in years		or emplo	yees ent	tering se	ervice at	+ .5 to		
t	15	20	25	30	35	40	45	50
14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 40 42 43 44 45 46 47 48 49 51 51 52 53 54	.0210 .0180 .0195 .0210 .0225 .0255 .0270 .0315 .0375 .0405 .0520 .0580 .0620 .0680 .0790 .0980 .1160 .3510 .4110 .2830 .5000 .3000 .3000 .3000 .3000	.0280 .0195 .0270 .0345 .0390 .0460 .0530 .0590 .0640 .0730 .0910 .1080 .3300 .3930 .2720 .5000 .3000 .3000 .3000 .9903	.0160 .0150 .0160 .0170 .0190 .0320 .0390 .0430 .0540 .0570 .0880 .2850 .3540 .2520 .5000 .3000 .3000 .3000 .3000	.0330 .0260 .0280 .0360 .0430 .0500 .3190 .2350 .5000 .3000 .3000 .3000 .9903	.0550 .0420 .0300 .0330 .0410 .0560 .2270 .2930 .5000 .3000 .3000 .3000 .9903	.0900 .0650 .2090 .2790 .2060 .3000 .3000 .3000 .9903	.5000 .5000 .5000 .5000 .3000 .3000 .3000 .9903	.5000 .3000 .3000 .3000 .9903



TABLE 5

### BELL ATLANTIC CORPORATION ANNUAL RATES OF RETIREMENT ON SERVICE

#### Female Employees

#### Non-Management

Service in years	F	dates of for empl				: + .5 to		5
t	15	20	25	30	35	40	45	50
14 15 16 17 18 19 21 22 23 24 25 26 27 28 29 31 32 33 33 33 33 33 34 44 45 46 47 48 49 55 55 55 55 55 55 55 55 55 55 55 55 55	.0600 .0510 .0510 .0530 .0590 .0650 .0710 .0790 .0860 .1170 .1160 .1210 .1330 .1460 .1550 .3660 .4080 .3280 .3000 .3000 .3000 .3000	.0780 .0550 .0650 .0700 .0830 .0990 .1040 .1100 .1200 .1320 .1430 .3400 .3810 .3120 .5000 .3000 .3000 .3000 .3000	.0900 .0510 .0520 .0550 .0800 .0870 .0930 .1050 .1180 .1260 .3120 .3460 .2930 .5000 .3000 .3000 .3000	.1300 .0850 .0900 .1000 .1110 .1160 .2960 .3220 .5000 .3000 .3000 .3000 .3000 .9949	.1830 .1090 .0950 .0950 .0980 .1070 .1100 .2880 .3100 .2700 .3000 .3000 .3000 .3000 .9949	.2500 .1260 .2840 .3030 .3640 .3000 .3000 .3000 .3000 .9949	.5000 .5000 .5000 .5000 .3000 .3000 .3000 .9949	.5000 .3000 .3000 -3000 -9949



TABLE 6

BELL ATLANTIC CORPORATION

ANNUAL RATES OF MORTALITY AMONG ACTIVE EMPLOYEES

Age x	Rates of M during yea x + .5 to	r of age x + 1.5	Age x	Rates of Mortality during year of age x + .5 to x + 1.5	
	Male	Female		Male	Female
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42	.0011 .0011 .0011 .0010 .0010 .0010 .0009 .0009 .0008 .0008 .0008 .0008 .0007 .0007 .0007 .0007 .0007 .0007 .0007 .0007 .0007 .0008 .0008 .0008	.0003 .0003 .0003 .0003 .0003 .0003 .0004 .0004 .0004 .0004 .0004 .0005 .0005 .0005 .0006 .0007 .0007 .0007 .0008 .0008 .0009 .0009 .0010 .0010	43 44 45 46 47 48 49 51 52 53 55 55 55 55 66 66 67 68 69	.0021 .0024 .0027 .0030 .0034 .0038 .0041 .0045 .0050 .0055 .0061 .0068 .0075 .0083 .0092 .0102 .0111 .0121 .0132 .0143 .0154 .0165 .0177 .0190 .0202 .0215 .0228	.0013 .0015 .0017 .0019 .0021 .0022 .0024 .0025 .0026 .0027 .0030 .0033 .0037 .0040 .0044 .0049 .0053 .0058 .0063 .0068 .0074 .0080 .0086 .0093 .0101 .0110



TABLE 7

BELL ATLANTIC CORPORATION

ANNUAL RATES OF MORTALITY FOR SERVICE PENSIONERS

Age x	Rates of Mortality during year of age x + .5 to x + 1.5		Age x	Rates of M during yea x + .5 to	er of age x + 1.5
	Male	Female		Male	Female
45	.053	.020	78	.066	.040
46	.048	.018	79	.072	.044
47	.044	.017	80	.078	.048
· 48	.040	.015	81	.084	.053
49	.036	.014	82	.090	.060
50	.032	.013	83	.098	.068
51	.029	.012	84	.108	.076
52	.026	.011	85	.119	.088
53	.024	.010	86	.132	.097
54	.022	.010	87	.145	.106
55	.021	.009	88	.157	.117
56	.020	.009	89	.173	.127
57	.019	.009	90	.187	.139
58	.018	.009	91	.202	.151
59	.018	.009	92	.217	.165
60	.018	.009	93	.233	.180
61	.018	.009	94	.248	.197
62	.018	.010	95	.265	.216
63	.019	.010	96	.282	.237
64	.020	.011	97	.300	. 258
65	.021	.012	98	.319	. 280
66	.022	.012	99	.340	.305
67	.024	.013	100	.363	.332
68	.026	.015	101	.388	.361
69	.028	.016	102	.415	.394
70	.031	.018	103	.447	.430
71	.034	.020	104	.486	.470
72	.037	.022	105	.534	.519
73	.041	.025	106	.587	.575
74	.046	.027	107	.650	.635
75	.050	.030	108	.732	.703
76	.055	.034	109	.852	.806
77	.060	.037	110	.999	.999

For ages prior to 45, the mortality rate is assumed constant at that age value.



#### **BELL ATLANTIC**

#### **RESPONSE TO PARAGRAPH 26**

#### **EXHIBITS**

**EXHIBIT 26-A BELL ATLANTIC CORPORATION** 

1991 ACTUARIAL REPORT

1991 REGULATORY COSTS UNDER SFAS 106

THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

**EXHIBIT 26-B BELL ATLANTIC CORPORATION** 

1991 ACTUARIAL REPORT

1991 REGULATORY COSTS UNDER SFAS 106

THE BELL ATLANTIC MEDICAL AND DENTAL EXPENSE PLANS AND

MEDICARE PART B REIMBURSEMENT (ASSOCIATE)

**EXHIBIT 26-C BELL ATLANTIC CORPORATION** 

1991 ACTUARIAL REPORT

1991 REGULATORY COSTS UNDER SFAS 106

THE BELL ATLANTIC RETIREE GROUP LIFE INSURANCE PLANS

BELL ATLANTIC CORPORATION
1991 ACTUARIAL REPORT

1991 REGULATORY COSTS UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS



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# ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### I. INTRODUCTION

This report provides the 1991 results of the first annual actuarial valuation for determining the cost on an accrual basis for Bell Atlantic Management Retiree Health Plans.

The results in this report reflect (1) the adoption of Statement of Financial Accounting Standards No. 106 (SFAS 106) as of January 1, 1991 and (2) the delayed recognition of the transition obligation as of January 1, 1991. The transition obligation was amortized on a straight-line basis over the average remaining service period of active plan participants.

Postretirement Medical, Dental and Medicare Part B Reimbursement plan provisions are reflected in the cost and APBO on a combined basis as all benefits are unfunded. The Company's current policy is to not advance fund these benefits.

#### II. SUMMARY OF RESULTS

The transition obligation and cost for 1991 are as follows (in \$ thousands):

1/1/91 Transition Obligation	<u>1991 Cost</u>
\$1,115,579	\$170.836

Details of the components of the cost are shown on Exhibit I.



## ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### II. SUMMARY OF RESULTS (CONTINUED)

The principal assumptions include the following:

- ➤ Discount Rate: 8.00%
- Expected Long Term Rate of Return on Plan Assets: Not Applicable
- ▶ Health Care Trend Rates:
  - Medical
    Approximately 15% initially, grading down to an ultimate rate of approximately 5%
  - Dental 4% in 1991 and later years
    - Medicare Part B Reimbursement 0%
- Pay Growth Not Applicable

#### III. NET PERIODIC POSTRETIREMENT BENEFIT COST

Exhibit I shows the components of the net periodic postretirement benefit cost.

The net periodic postretirement benefit cost is made up of the following components:

- Service Cost
- ► Interest Cost



### ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### III. NET PERIODIC POSTRETIREMENT BENEFIT COST (CONTINUED)

- ► (Expected Return on Plan Assets)
- ► Amortization of Transition Obligation
- ► Amortization of Prior Service Cost
- Amortization of (Gains) and Losses

The expected return on plan assets was zero because the Plans are unfunded. There was no amortization of gains and losses because 1991 was the first year for which costs were determined based on SFAS 106. The transition obligation was amortized on a straight-line basis over the average remaining service period of active plan participants of 17.04 years. A prior service cost was established as a result of an amendment in 1991.

The plan amendment provided that certain employees not eligible to retire were made permanently eligible to retire and, therefore, entitled to postretirement medical and dental coverage at the time actual retirement occurs. The plan amendment affected active participants who were not eligible to retire as of December 15, 1991 but who would otherwise have become eligible to retire within the three year period beginning immediately after December 15, 1991 had there been no amendment.

#### IV. ACTUARIAL COST METHOD

The actuarial cost method is prescribed by SFAS 106. The method is a version of the commonly used Projected Unit Credit Cost Method.



### ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### IV. ACTUARIAL COST METHOD (CONTINUED)

Under the prescribed method, postretirement benefits are allocated to each year of service within the attribution period. The attribution period begins at date of hire unless the plan's benefit formula grants credit for service only after a later date. The attribution period ends at the full eligibility date which is the date the employee has rendered all the service necessary to receive full benefits.

The APBO is the present value of the benefits assigned to years within the attribution period but prior to a certain date. For example, the APBO as of January 1, 1991 is the present value of postretirement benefits allocated to the years of service rendered prior to January 1, 1991.

The service cost is the present value of postretirement benefits assigned to the current year. For example, the 1991 service cost is the present value of benefits assigned to 1991.

The end of the attribution period has already occurred for active participants who have already reached their full eligibility date and for retired participants. As a result, the APBO for each of these two groups is the present value of all future postretirement benefits, and the service cost is zero.

#### V. ASSUMPTIONS AS TO FUTURE EXPERIENCE

In order to determine the cost and APBO under SFAS 106, it is necessary to estimate the postretirement benefits that will be paid in future years for currently active employees and retirees (including benefits to be paid for their eligible dependents) and to allocate benefits for active participants to the current year and to



### ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### V. ASSUMPTIONS AS TO FUTURE EXPERIENCE (CONTINUED)

years of service rendered before the valuation date. The allocated benefits are then discounted for survivorship and interest to estimate their present values. The process involves the use of actuarial assumptions. The two most important assumptions are the discount rate and the health care cost trend rates. The primary assumptions also include withdrawal rates, disability rates, mortality rates and retirement rates for active employees and mortality rates for retired employees.

#### A. Discount Rates and Expected Long Term Rate of Return on Plan Assets

The discount rate for 1991 is 8%. The 8% discount rate assumption was also used to determine the Company's 1991 cost under SFAS 87 for the Bell Atlantic Management Pension Plan. The expected long term rate of return on plan assets is not applicable because the Plans are unfunded.

#### B. Mortality, Withdrawal, Disability and Retirement Rates

The active mortality, withdrawal, and retirement rates and the postretirement mortality rates used to determine the present values of future health care benefits are the same rates that were used to determine the Company's 1991 costs under SFAS 87 for the Bell Atlantic Management Pension Plan. A new postretirement mortality table (the 1991 Telecommunications Mortality Table) was constructed in 1991 based on 1986 through 1989 retiree mortality experience of telecommunications retirees including Management retirees of Bell Atlantic. The 1986-1989 mortality experience was projected with mortality improvement to 1991. Tables 1 through 8 show the detailed assumptions.



## ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### V. ASSUMPTIONS AS TO FUTURE EXPERIENCE (CONTINUED)

The rates of separation from service shown on Tables 1 and 2 combine the mortality, withdrawal and disability rates.

#### C. Transfer Assumption

The withdrawal rates reflect the net effect of withdrawals from service as an active management employee and transfers from Associate to Management status.

#### D. Health Care Cost Trend Rates

Both the medical and dental cost trend rates are shown in Exhibit IV.

The approach used in this valuation for both Medical and Dental benefits is to apply annual health care cost trend rates to current claim costs per retiree in order to estimate claim costs per retiree in future years.

The medical cost trend rate assumptions start at 15% in 1991 (13.9% for ages 65 and over) and decline to an ultimate rate of 5.00% in 2003 (4.80% for ages 65 and over). Changes in Medicare with regard to Balance Billing and other legislated changes are reflected in the medical trend rates. For example, the trend for ages 65 and over includes a temporary decline during 1992-1993.



### BELL ATLANTIC CORPORATION ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106

#### THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### V. ASSUMPTIONS AS TO FUTURE EXPERIENCE (CONTINUED)

The dental trend rate assumptions shown in Exhibit IV are a blend of two components; one for Type A services and the other for Type B services. Type B services consist of the more expensive dental care services and are based on fixed fee schedules. The average incurred claims for Type B services are not expected to increase from year to year as much as those for the Type A services. Thus, the trend rate assumptions for Type B services are lower.

The health care cost trend rates do not take into consideration any anticipated changes in the demographic composition of the employees, retirees, or their eligible dependents. The trend rates also do not reflect any possible future changes in plan provisions or legislation.

Health care cost trend rates are not used with respect to Medicare Part B Reimbursement because the reimbursement is frozen at the 1991 Medicare Part B amount.

While it is not to be expected that any of the assumptions described above will prove to agree exactly with future experience, it is believed that the resulting costs and liabilities developed are reasonably accurate. The assumptions have been developed to be individually realistic.



### ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### VI. CLAIM COSTS

The initial 1990 incurred claim costs per retiree are an essential input to the valuation. The input medical claim costs were compiled from actual 1989 incurred claim experience for all retirees and their eligible dependents. The actual medical claim experience was provided by Blue Cross/Blue Shield of the National Capital Area. The following adjustments were made to the claim experience:

- (1) The 1989 paid claim cost experience was adjusted to an estimated incurred basis to reflect 1989 incurred claims not yet paid as of February 28, 1991 but expected to be paid after that date.
- (2) The claim costs were adjusted to reflect insurance carrier expenses and the experience of retirees participating in HMO's.
- (3) The incurred claim costs were adjusted for changes in benefit provisions not fully reflected in the actual claim experience.
- (4) Average 1989 incurred claim costs per retiree were determined from the adjusted incurred claims costs in item (3) and from the life counts taken from the retiree census data as of January 1, 1989 and January 1, 1990. The average incurred claims per retiree include both dependent and retiree claims because the surviving dependent claims cease to be financed by Company contributions shortly after the death of a retiree.



## ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### VI. CLAIM COSTS (CONTINUED)

(5) The 1989 incurred claim costs per retiree were adjusted so as to be on a 1990 incurred basis by applying 1990 trend assumptions of approximately 14% for medical and 4% for dental.

For participants who retired prior to 1992, the average 1990 incurred claim costs per retiree shown in Exhibit V are broken down by age group and sex to reflect differences in claim experience by age and sex and also to reflect the fact that dependency, and therefore dependent claims per retiree, vary significantly both by age and sex. Average claim costs per retiree which vary by age and sex are also appropriate to reflect differences in sex composition between retirees and actives.

For participants who retire after 1991, the average 1990 incurred claim costs per retiree shown in Exhibit VI are broken down by two age groups (pre 65 and post 64) and by retiree only, retiree with one dependent and retiree with two or more dependents. The purpose of this breakdown is to reflect the cost sharing provisions under the Substantive Plan discussed below under <u>Plan Provisions</u>. The cost sharing provisions of the Substantive Plan vary by the grouping shown on Exhibit VI.

Average dental claims per retiree varying by age and sex group were used for both future retirees and current retirees. The 1990 average dental claims for retirees are shown in Exhibit VII.



### ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### VII. PLAN PROVISIONS

The postretirement eligibility provisions for medical and dental coverage are described in Appendix A. The benefit provisions of the Retiree Medical and Dental Plans and Medicare Part B Reimbursement are summarized in Appendices B, C and D respectively.

The provisions of the Retiree Medical Plan vary depending on when a participant retires as follows:

Date of Retirement

o Before April 1, 1986

o On or After April 1, 1986

This report reflects benefit changes due to OBRA '90 and other recent legislation.

The valuation results reflect a Substantive Plan under which the Company and retirees who retire on or after January 1, 1992 are expected, in general, to share in future cost increases in retiree medical benefits beginning in 1994. For retirees with one or more dependents, the cost sharing with respect to the first dependent is expected to begin in 1994 and increase such that by the year 2013, the retiree will be paying for 50% of the cost of the dependent coverage. For retirees with two or more dependents, the cost sharing with respect to dependents other than the first dependent will also be phased-in over the same twenty year period beginning in 1994 and ending in the year 2013. However, by the year 2013 the retiree will be expected to pay 100% of the cost of the dependent coverage for dependents other than the first dependent. The cost sharing provisions were assumed to affect plan participation.



### ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### VII. PLAN PROVISIONS (CONTINUED)

The Substantive Plan has been communicated to the participants who could be affected.

#### VIII. DEMOGRAPHIC DATA

The valuation was based on active and retiree census data as of January 1, 1991. The census data are summarized as follows:

	<u>Actives</u>	Retirees Below Age 65	Retirees Age 65 and Over	Retirees Total
Number Average Age Average Service	20,381 43.0 19.6	7,233 59.2	9,251 73.3	16,484 67.1

The data for retirees are shown above separately for those below age 65 and for those age 65 and over because the Medical benefits expected to be paid are significantly different between these two age groups due to the fact that Medicare provides most of the coverage for those age 65 and over. Retirees include disability pensioners and service pensioners.

Bell Atlantic Corporation is the source of the data.

Demographic data were not available for disabled employees receiving Long Term Disability (LTD) benefits under the Company LTD Plan but who were ineligible for either disability or service pensions. However, the data did include claims paid for these employees; thus, they were reflected on an aggregate basis.



# ACTUARIAL REPORT FOR 1991 REGULATORY COST UNDER SFAS 106 THE BELL ATLANTIC MANAGEMENT RETIREE HEALTH PLANS

#### IX. MEDICARE

As a result of OBRA '89 & '90, non-participating doctors will be limited in the amount that they can charge Medicare patients. As Bell Atlantic reimburses over-65 retirees for any expenses not paid for by Medicare, this "Balance Billing" will cause the medical cost trend to be reduced in 1992 and 1993.

#### X. ACTUARY'S STATEMENT

Calculations reported herein have been made on a basis consistent with my understanding of the Statement of the Financial Accounting Standards No. 106 (SFAS 106). Determination for purposes other than meeting employer financial accounting requirements (such as for purposes of measuring participant benefit security) may differ significantly from the results contained in this report.

The plans were assumed to continue indefinitely; however, this assumption should not be construed to mean that Bell Atlantic has an obligation to continue the plans.

Respectfully Submitted,

Thomas G. Bainbridge, ASA, MAAA Vice President and Consulting Actuary

Muma J. Bambudge

January 30, 1992



#### MANAGEMENT

#### EXHIBIT I

### COMPONENTS OF NET PERIODIC POSTRETIREMENT BENEFIT COST (\$ THOUSANDS)

1991

		Net Periodic Postretirement Benetit Cost
i)	Service Cost	\$ 16,059
2)	Interest Cost	89.056
3)	Expected Return on Assets	0
4)	Amortization of Transition Obligation	65,468*
5)	Amortization of Prior Service Cost	253
6)	Amortization of Gains and (Losses)	0
Total	(1)+(2)-(3)+(4)+(5)-(6)	\$170.836

<sup>\*</sup> Amortization of Transition Obligation of \$1,115,579. The Transition Obligation is equal to the Accumulated Postretirement Benefit Obligation.



# BELL ATLANTIC CORPORATION MANAGEMENT EXHIBIT II

### ACCUMULATED POSTRETIREMENT BENEFIT OBLIGATION (\$ THOUSANDS)

	<u>APBO</u>
Retirees	\$ 686,424
Other Fully Eligible Plan Participants	93,505
Other Active Plan Participants	335.650
Total	\$1,115,579



# BELL ATLANTIC CORPORATION MANAGEMENT EXHIBIT III

### IMPACT OF 1% INCREASE IN HEALTH CARE TREND RATE (\$ MILLIONS)

	<u>Impact</u>
1991 Combined Service Cost and Interest Cost	\$15.5
1/1/91 APBO	141.2

